COMBINED DECLARA (Includes Reference to PC	TION FOR PAT	ENT AN	D POWER	OF ATTORNEY		File	No. 00-87
As a below named inventor	r I hereby declars	that					
My residence post office of	ddraes and eitime	uiat:					
My residence, post office a	io listed below	isnip are a	s stated bel	ow next to my name; 1	believe that	I am the orig	ginal, first and sole
inventor (if only one name	is listed below) of	r an origin	al, first and	joint inventor (if plura	il names are	listed below) of the subject
matter which is claimed an	d for which a pate	nt is sough	nt on the in	vention entitled:			
SELENO-CYSTEINE CO	NTANING PROT	EIN ZSN	K13				
the specification of which (check only one ite	em below)	:				
is attached hereto	was filed as U	Inited Stat	es applicati	ion Serial No. on De	cember 12,	2001	
and was amended on							
was filed as PCT into	ernational applicat	tion Numb	er	on			
I hereby state that I have re	viewed and under	etand the	contents of	the above identified an	anifiantian	in the state of the	
amended by any amendmen	nt referred to above	e Lackec	wledge the	duty to disalose info	concanon,	including the	ciaims, as
of this application in accord	dance with Title 3	7 Code of	Fordered De	auty to disclose inform	nation whic	ii is material	to the examination
Title 35, United States Cod	le 110 of any form	ign annlia	ation(a) f	guiadons, 1.50. I here	by claim to	reign priority	benefits under
application(s) designation	t least one court	aga applic	auon(s) for	patent or inventor's ce	runcate(s)	or of any PCT	International
application(s) designating a	or patent or inven	y outer tha	in the Unite	u states of America lis	ted below a	ind have also	identified below
any foreign application(s) f	or patent or inven	tors certin	icate(s) or a	any PCT international a	application(s) designating	g at least one
country other than the Unite	ed States of Amer	ica filed by	y me on the	same subject matter h	aving a filin	ig date before	that of the
application(s) of which price	ority is claimed:						
PRIOR FOREIGN/PCT	APPLICATION(S	S) AND A	NY PRIOR	ITY CLAIMS UNDE	R 35 U.S.C.	119:	
COUNTRY	APPLIC	ATION N	UMBER	DATE OF FILING		PRIORIT	Y CLAIMED
181						☐ YES	□NO
K I						☐ YES	□ NO
						☐ YES	□NO
I hereby claim the benefit u	nder Title 35 Uni	ted States i	Codo 110/o	A of some I Today A Control			
II S ADDI	ICATION NUME	DED	Code 119(e	of any United States	provisional	application(s	i) listed below.
60/256,676			U.S. FILING DATE				
199				December 18, 20	000		
1.							
F1 1							
C.							
Lhereby claim the benefit	under Title 35,	United S	tates Code	120 of any United S	States appli	ication(s) or	PCT international
application(s) designating t	the United States	of Americ	eathatis/a	re listed below and in	enfar ac th	a cubiaat ma	tton of analy of the
claims of this application is	not disclosed in t	that/those i	prior applic	ation(s) in the manner	provided by	v the first par	agraph of Title 35
United States Code, 112,	1 acknowledge t	he duty to	n disclose	material information	ac defined	in Title 27	Code of Federal
Regulations, 1.56 which occ	curred between th	e filing da	te of the pri	ior application(s) and t	he national	or PCT inter	national filing date
of this application:						or r or meer	national filling date
DDIOD II G + DDI 1G+ TYO	170 OR BOT -						
PRIOR U.S, APPLICATIO	NS OR PCT INT	ERNATIO	NAL APPI	LICATIONS DESIGN			BENEFIT
	U.S. APPLI	CATIONS			STATUS	(check one)	
U.S. APPLICATION	NUMBER		U.S. FILI	NG DATE	Patented	Pending	Abandoned
PCT AP	PLICATIONS DE	SIGNATII	VG THE II	9	-		
APPLICATION	FILING DA			IAL NUMBERS	 -	+	
- I Dichtion	I ILLING DE	1113		ED (if any)	I	1	
			MOSIGNI	ED (II any)			
			L				

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

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1.3 Full Name Family Name First Given Name Second Given Name Residence City State or Foreign Country Country of Citizenship Post Office Post Office Address City State & Zip Code/Country Address Full Name Family Name First Given Name Second Given Name Residence City State or Foreign Country Country of Citizenship Post Office Post Office Address State & Zip Code/Country Address Full Name Family Name First Given Name Second Given Name Residence 12. State or Foreign Country Country of Citizenship Post Office Post Office Address State & Zip Code/Country Address ..6 Full Name Family Name First Given Name Second Given Name Residence State or Foreign Country Country of Citizenship

I hereby declare that all statement made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and then that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application any patent issuing thereon.

Signature of Inventor 1	Signature of Inventor 2	Signature of Inventor 3		
Date	Date	Date		
Signature of Inventor 4	Signature of Inventor 5	Signature of Inventor 6		
Date	Date	Date		